June 5, 2002

To: Vocational Providers

From: Jim Kammerer

Mary Kaempfe

Health Services Analysis

Subject: Important Performance Report Information and Helpful Tips

This memo describes the department's plans for the next three performance reports. We share some tips you can use to be sure your recommendations are transmitted successfully. This memo also outlines how and when you may request a department review of the data supporting your performance report.

You may find it helpful to have Provider Bulletin 01-04, and Provider Updates 01-02 and 02-01 available for reference while reading the rest of this memo.

Performance Reports

Dates Used to Calculate CACO Duration and Sample Periods

As stated in PB 01-04, duration for CACO calculations includes the number of days from the date the claim manager (CM) made the referral to the date the vocational rehabilitation counselor (VRC) submits an on-line recommendation. If the recommendation is not successfully transmitted, duration is calculated using the CM's referral closure date.

Whether a referral is included in the sample for the performance report depends on the CM's referral closure date. The VRC and branch CACOs for each referral also depend on this. A referral will appear in the performance rating data for the first time when the CM's referral closure date falls into the sample period. The referral will be included in as many reports as there are quarters included in the sample period. We are building toward an 18-month sample period so each referral will eventually be included for 6 quarterly reports before it drops off.¹

Since the VRC's CACO is determined from referrals closed by the CM, the 10-referral completion minimum means CMs must have closed at least 10 of the VRC's referrals.

Example: A CM made a referral on June 8, 2001. The VRC submitted a VocLink recommendation on September 10, 2001 and the CM closed the referral on October 5, 2001. The duration calculation is based on June 8 through September 10, 2001 – 105 days. October 5, 2001 first falls into the performance report sample period for the January

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¹ Appendix C of Provider Bulletin 01-04

2002 report. The referral will be included in the performance ratings through the July 2003 report.

Adjustments for Difficulty Factors

Several providers have asked how to include difficulty factor adjustments in CACO calculations. Provider Bulletin 01-04 explains this. A copy of this Bulletin is available on-line or by calling the department. Remember that complexity adjustments for the difficulty factors only affect the CACO when either the cost or the duration for that referral exceed the statistical norm.

Future Performance Reports

Beginning in July 2002, vocational provider performance will be reported in two formats. One will include firm/branch data and the other will report individual performance.

July, 2002 Report

- VRCs with at least 10 completions (CM closures) will have ratings published. The VRC's CACO scores will be an aggregate of referrals assigned to him or her, statewide, were referred and completed since June 1, 2001.²
- The VRC standard error of the mean (SEM) scores are based on a statewide SEM because VRCs' aggregated CACOs are comprised of referrals across service location boundaries.
- The branch/firm CACOs will be calculated and published as they have been. For the July and October reports, the branch/firm CACOs will not be aggregates of all work completed by the VRCs assigned to the branch. During this period, the branch/firm CACOs will include:
 - 1. Pre-June 2001 referrals made to the branch, and
 - 2. Referrals made directly to their VRCs (in which the firm is the payee) and completed since June 1. This is a change from what was published in PB 01-04.
- VRC and branch/firm reports will be published as separate reports.
- The Eligible/Conditional SEM threshold will be lowered from 3 SEMs to the sliding scale. A provider's SEM threshold will be based on the number of referrals completed (CM closures) in the sample period. Please see PB 01-04 more information..
- As a reminder, all reimbursed referrals except forensic referrals count toward VRC CACOs.

October 2002 Report

- The published performance report, and what CMs see, will appear in the same formats, as the July report.
- The department will preview the report of CACOs aggregated at the branch level. The format for this preview has not determined yet, but it will be made available to all providers.
- VRC and branch/firm reports will be published as separate reports.

January 2003 Report

- Beginning with this report, CACO scores will be aggregated and published at the branch level and go into production for claim managers.
- The VRC and branch/firm reports will be published as separate reports.

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² Provider Bulletin 01-04

The information system changes and data migration of referral files was a challenging undertaking. By and large, the referrals migrated with few problems.

A few common situations have become apparent and issues involving these situations continue to be raised by providers, so we are taking this opportunity to share them with you. Before contacting the department to request an adjustment of a date, please determine if one or more of these situations applies to your request.

Situation 1: Providers assert they made an on-line recommendation but the department used the CM's completion date instead of the VRC's recommendation date to calculate duration.

Observation: Unless Situation 2 or 3 below applies, research has found that this happens ONLY when a VocLink recommendation was not successfully transmitted. This is the most common discrepancy brought to our attention.

The on-line VocLink Manual states on page 29: "When the referral has been updated, you will be returned to the first screen."

TIP: Be sure you are automatically returned to the UVRS screen before moving to another screen. It may even be necessary to hit "enter" multiple times for your recommendation to successfully transmit to the LINIIS system. If you are not automatically returned to UVRS, your recommendation transmission was not successful. If you can see your recommendation on UVRS, your recommendation was successfully received, and the date has been recorded in LINIIS.

If you are having a problem transmitting a recommendation, you may call the VocLink Help Desk at 360-902-4995.

Providers are required to use VocLink correctly to transmit recommendations to the department. Therefore, dates for recommendations (via any medium) made after June 30, 2002, will not be reviewed nor adjusted by department staff for performance rating purposes.

Situation 2: Provider asserts duration for multiple referrals is being counted as one referral.

Observation: This is an understandable misconception about how referrals were made in the previous system. This situation arises only on referrals made before June 1, 2001 and reflects the way referrals were managed at that time. Examples of this situation include:

- Early Intervention and Ability to Work Assessment services provided under one referral.
- Plan Development and Plan Implementation services provided under one referral.
- Service interruptions due to medical instability or other reasons where a provider interrupted and then continued services under one referral.
- Referrals where a VRC recommendation may have been submitted but the on-line recommendation was pulled by the CM and the provider continued to work on the referral.

The above situations are all considered one referral in the LINIIS system. Duration for this type of referral is from the date the referral was made to either:

- a. the last on-line recommendation, IF the recommendation was correctly entered via VocLink, or
- b. the date the CM closed the referral when a VocLink recommendation is absent.

Situation 3: Referrals are being counted as post June 1, 2001 completions when the provider recommendations were made before June 1.

Observations: During the data migration to prepare for June 1, 2001, an open referral (one needing to be migrated into the new system) was a referral in which the CM had not selected an outcome. Some of these had VRC recommendations attached but are considered open until the CM closes the referral. There are two sets of referrals covered by this situation.

Set A: Transition referrals

These are referrals on active claims that the CM had not closed at the time of the migration and transition to the new rules. These referrals don't appear on the performance report until the CM closes (completes) the referrals. However, duration is calculated with the VRCs' recommendation dates IF the recommendations were correctly submitted on VocLink.

Set B: Old referrals with recommendations made long ago.

The post June 1, 2001 environment requires CMs to close ANY open vocational referral prior to making a new referral or closing a claim. These are showing on the report if the VRCs' recommendations were made during the sample period or IF NO recommendation was submitted on VocLink.

Department Review and Adjustment of Recommendation or Completion Dates

For Recommendations Made On or After July 1, 2002:

The department will neither review nor adjust recommendation dates for performance rating purposes for recommendations made via any medium July 1, 2002 or later. Providers are expected to correctly submit on-line recommendations on VocLink Connect.

For Recommendations Made Before July 1, 2002:

As of July 1, 2002, the department will only consider referral duration review requests when the disputed duration differential is more than 30 calendar days.

If you believe you have referrals that may have improper end dates and the recommendations were made before July 1, 2002, please review the following instructions.

For each referral you would like reviewed, please provide the following information. This will significantly expedite the department's research and result in faster response times.

- 1. Injured worker's name
- 2. Claim number
- 3. Referral Identification number
- 4. Date provider asserts is the correct recommendation date (For Situation 2 referrals, be sure it is the recommendation that resulted in services ending.)
- 5. Completion and Duration end dates used on the report

6. Brief description of your concern about the dates used by the department. (If you can determine if one or more of the above situations applies, that would be helpful.)

Requests for reviews for the performance rating should be submitted to Jim Kammerer or Mary Kaempfe. When the department receives this information, we will attempt to verify the recommendation dates. If the dates are verified, and if the difference is more than 30 days, adjustments will be made to the record. In order to have changes included in the next performance report, the department's research and adjustments <u>must be completed</u> a month before the publication date of the report. Please allow sufficient time when submitting your review requests, or they will not be completed in time for the next quarter's performance report.

We hope this memo helps you to better understand how the performance reporting system works.

For more information, please refer to Provider Bulletin 01-04, Provider Updates 01-02 and 02-01 and the vocational services website http://www.lni.wa.gov/hsa/voc/default.htm. You can reach us by phone or email:

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Thank you.